

## THOMAS HODGKIN AND 1832: CHOLERA, COLONIZATION, AND CHILD LABOR

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**T**HE year 1832, in which Hodgkin described the syndrome that bears his name, was the year of the Reform Bill, giving representation to counties or towns which had sent no members to Parliament. This change was an admission that the wealth of Britain was a product of the towns rather than the countryside. Parliament also made the resurrectionists obsolete by passing the Anatomy Act, which provided for the medical profession's need for educational dissection material. In 1832 cholera struck Great Britain with epidemic force, leaving more than 32,000 dead and threatening public health and safety. Hodgkin expressed his views on combating this scourge. He emphasized the distribution of relief services and charity and the importance of work for the poor. Hodgkin always associated squalor and disease with lack of employment.

### THE PUBLIC HEALTH

Squalor, filth, and overcrowding, legacies from the middle ages, were made worse by the Industrial Revolution. Few bothered about clean air, pure food, and water. The British government provided the poorer classes with almost no protection against the unwholesomeness of their surroundings. The acceptance of laissez faire principles inhibited governmental regulation of health and industry during the 18th century. The laws were inadequate or nonexistent in regard to unfit housing, hazardous industries, adulteration of food and drugs, sale of poisons, animal wastes, and medical licensure.<sup>1</sup>

However, concern for public health existed both in Parliament and in the popular press, where the plight of the poor and unfortunate was vividly described. A by-product of the Industrial Revolution was a consciousness that the environment can be controlled. Illness and poor health were no longer regarded as inescapable burdens of life on earth. Such fatalistic attitudes became unfashionable in an age of progress. The dominant idea of progress led to the belief that man could overcome disease even as he could control the other forces of nature.<sup>2</sup>

However, the progress of public hygiene and welfare in England from 1800 to 1830 lagged. The dominant conservatives regarded all appeals for social reform as subversive, possibly a backlash against the excesses of the French Revolution, and the war with France drew attention from domestic affairs. Concern about disease reappeared with the fear of cholera. Then the interest of government, the public, and the medical profession in public hygiene suddenly increased, along with demands for investigations, clean-ups, and general sanitary reform.<sup>3</sup>

The mystery of its origin, its high rate of mortality, and its ominous spread across continents and overseas made cholera the most feared of all diseases. Endemic in India for centuries, cholera penetrated the Russian land mass in 1829, and moved along the river systems into central and western Europe during 1830-31. Then it moved with merchants, pilgrims, and armies on the march. The epidemic in central Europe excited much interest and fear in England, where until then cholera had been regarded as an Asiatic disease and was as much a mystery as plague had been five centuries earlier.

#### CONTAGION OR MIASMA?

Since there was ignorance of transmission of cholera or the means of its prevention, intense controversies among physicians, press, and public were frequent. Physicians recommended quarantine and isolation and stressed the need for sanitary improvements. This simultaneous advocacy of sanitation and quarantine revealed confusion concerning the etiology and transmission of cholera. A frequently expressed opinion was that Asiatic cholera was an aggravated form of common cholera, a reassuring and flexible term descriptive of dysenteries and diarrheas. This opinion implied an indigenous origin, not imported, and not contagious. Common cholera sounded less threatening than a new and spectacularly deadly disease.<sup>4,5,6</sup>

Quarantine helped sometimes, but direct contact was not necessary to contract cholera, which moved erratically and might skip over whole areas without contact. As the epidemic of 1832 spread, the dominant contagionist view was replaced by anticontagionist views, invoking the agencies of noxious airs, evil humors, or "miasmas" emanating from within the earth or released into the air by mud, sewage, filth, or other decaying and putrid animal or vegetable matter. These concepts called for sanitary measures.<sup>7,8</sup>

Quarantine and contagion were discredited for social reasons by a society dependent on freedom of movement for trade and commerce. Contagionism was a doctrine requiring government controls and quarantines. To merchants and industrialists this meant disruption of trade and economic loss. Anticontagionists were welcomed as reformers and liberals opposed to government

interference. Furthermore, anticontagionist doctrines permitted the churches to regard cholera with religious fatalism as an unpredictable visitation rather than a contagion against which one could take precautions.<sup>9</sup>

#### MORALITY, RELIGION AND GERMS

Since the concept of disease specificity was not generally accepted, social and moral factors were assigned a role in the cause of cholera. Alcoholism was often blamed, along with neglect of religion and prayer. If not directly imposed by Divine Providence as a form of well-deserved punishment for individual sin or collective national guilt, the onset of cholera was undoubtedly the result of a weakened physical constitution due to transgressions of God's physical, moral, and spiritual laws. This explanation made pain and death legitimate and more bearable. The idea of predisposition to cholera reinforced a weak point in the atmospheric theory by explaining how some came down with the disease while others, who breathed the same air, did not.<sup>10,11</sup>

Medical knowledge being what it was, prayer was probably the most effective preventative available to the middle classes. The calming influence of religion had a social as well as a medical effect, for it gave many the courage they needed to carry on with their responsibilities in the face of sudden death. The full range of religious responses to the cholera was evoked by an official day of fasting, prayer, and humiliation, observed on March 21, 1832. The working-class radical press derided the whole affair, pointing out that asking the poor to fast was superfluous.<sup>12</sup>

A germ theory of disease had no practical application at the time because it could not explain cholera among people who had no contact with the sick, or the failure of many people in intimate contact with the sick to develop the disease. Pathogenic microorganisms were not known, and their transmission in food and water, and by human, insect, and animal carriers was not understood. Scientific standards of 1832 provided no guidance in the planned and orderly accumulation of scientific knowledge. Effective research was hampered by professional rivalries, the inadequate resolving power of available microscopes, and the absence of solid nutrient media on which pathogenic bacteria could be grown and statistical techniques to analyze epidemiological data. Consequently, when cholera returned in 1848-49, it struck in the same places and found the same state of unpreparedness.

#### A SOCIAL CHALLENGE

Cholera arrived in Great Britain for the first time in October 1831, by ship

from Hamburg. It broke out in Sunderland, a seaport near Newcastle. Moving like a contagion, it reached London in February 1832. Its connection with unsanitary living conditions and polluted water supplies meant that most of its victims would be poor. The epidemic exposed urban misery and the subsistence level of life of much of the cities' population. The epidemic sharply emphasized the inequality between the social classes. Not only was life hard and cruel for the lower classes, but now death came more easily and more frequently to them. Living in filthy crowded rooms on inadequate diets, the poor suffered the severest cholera attacks.

The epidemic struck England during the final stages of the Reform Bill of 1832 and intensified social tensions. The middle class saw cholera as a poor man's disease and did not panic and run. They stayed in their offices and counting houses. The ruling class saw cholera as a threat to the social and economic well being of the community and reacted sharply with public health restrictions and cholera hospitals, which the poor saw as a far more serious threat to their legitimate rights than cholera.<sup>13,14</sup>

No one wanted cholera hospitals in his part of town and no one wanted to go into the hospital. The poor man feared that he would be murdered there and dissected by the doctors. Rapid burial of cholera victims added to this unrest by interfering with traditional funeral and mourning customs. In many places the public health measures of the authorities and the physicians met with violent resistance and rioting.<sup>15</sup>

Many suspected that the alarm over cholera was a government hoax created by the antireformers to produce counterrevolutionary excitement and to distract attention from the reform agitation and from the wretched living conditions of the working poor. Radical leaders attacked the government's special "cholera powers" as invasions of private rights and a thinly disguised assault on reform. The cholera itself was challenged as an imaginary and bogus humbug which the ruling class foisted on the people and a scheme to make money for physicians and druggists.<sup>16,17</sup>

#### A PAMPHLET ON CHOLERA

Such was the state of affairs and intellectual climate when, soon after cholera reached England, Thomas Hodgkin published a pamphlet in which he offered his own suggestions for dealing with the epidemic, "as one who has long taken a lively interest in the means of promoting the public health, . . ."<sup>18</sup> Although the medical profession was rarely concerned with public hygiene, some medical men combined humane sentiments with a scientific interest in prevention of disease. The pamphlet has an interesting

title page. The long title is printed in nine separate lines of type set in six different sizes and two styles. And, oddly for a publication directed to the "Public in General," it is prefaced by a Greek quotation from Homer's *Iliad* and one in Latin from Cicero's *De Republica* (Figure 1).

Although not committing himself as a contagionist or a noncontagionist, Hodgkin admitted the merit of the conflicting evidence supporting both points of view. Nevertheless, he strongly objected to quarantine measures or any plan of isolating cholera patients into special wards or hospitals set aside specifically for that disease. He feared that grouping of patients may aggravate or spread the disease to other patients and their attendants because "the protective principle which many individuals possess must be greatly impaired, and the extension of the disease necessarily promoted." He mentions that fever patients at Guy's Hospital are systematically dispersed throughout the different wards without any fear of ill effects.<sup>19</sup>

Hodgkin knew that communicable diseases, such as smallpox and scarlet fever, require additional factors besides the contagious principle to become widespread or particularly severe and fatal. Since this combination does not come together in all places simultaneously, epidemics are usually progressive. But for this circumstance, cholera might long since have broken out in the London area, because people either recently recovered or who have been in close contact with sufferers are constantly arriving from infected foreign areas. Therefore, he questioned the effectiveness of quarantine after the appearance of symptoms, especially the quarantine of ships carrying coal and other vital supplies whose delay can add to the miseries of the poor, especially in winter because of the scarcity and cost of fuel. Quarantine, warned Hodgkin, would produce hardships for manufacture and commerce. Yet he urged the prohibition of large crowds of people such as at fairs and other occasions where large numbers of people come together "for idle and useless, if not for dissolute and corrupting, purposes."<sup>20</sup>

Hodgkin's views on the controversy placed him in the large center of moderates, the so-called contingent-contagionists, who tried to compromise on the evidence before them. They believed that cholera was contagious under some circumstances as one of many possible factors that could cause the disease. But, by condemning quarantines, they showed their true convictions, and came down on the side of the anticontagionists. Hodgkin's concern for the poor did not alter his upper middle class economic philosophy and liberal political loyalty. Most physicians at the time were liberal and bourgeois and favored anticontagionism. As a result, they, as did Hodgkin,

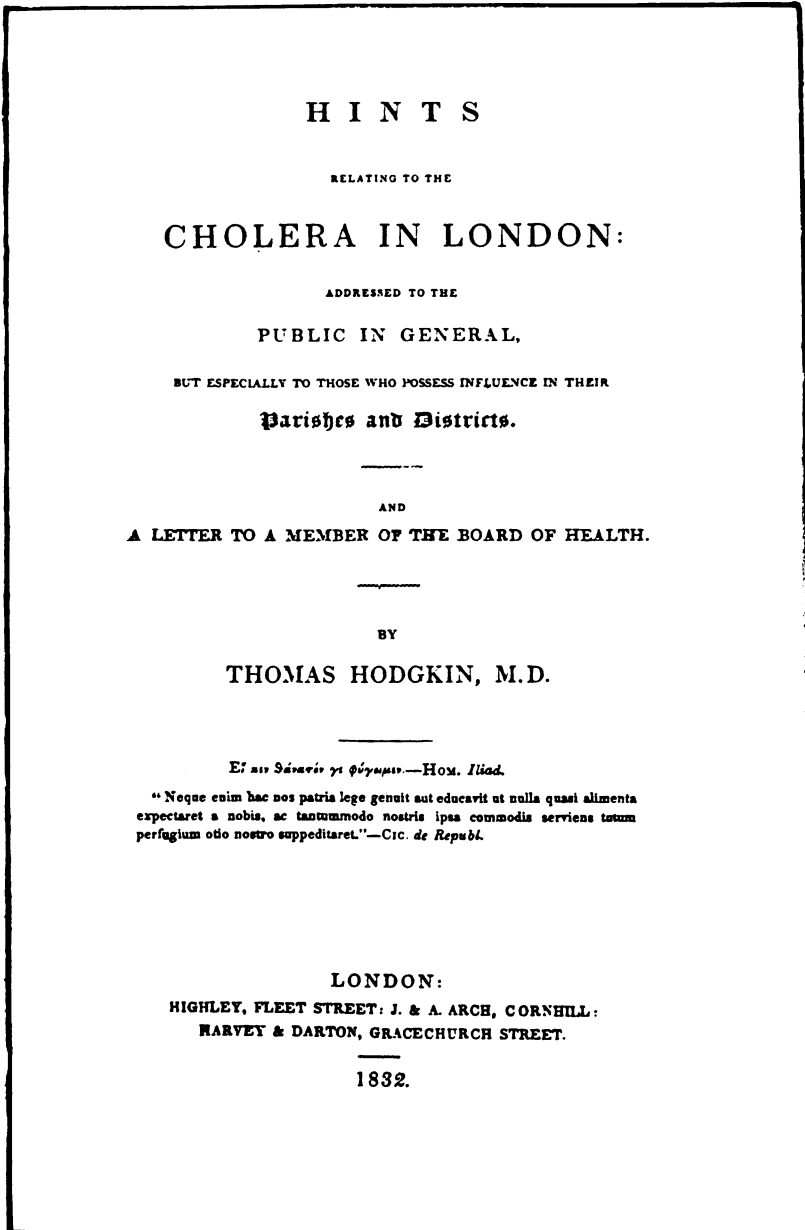


Fig. 1. Title page of Hodgkin's pamphlet on cholera

emphasized the commercial and maritime damages brought about by contagionist-motivated quarantines.<sup>21</sup>

The connection between bad living conditions and cholera was too obvious and too dramatic to be overlooked. To prevent or mitigate the spread of cholera, Hodgkin believed it necessary to change the living conditions of the poor. The affected individuals were poorly clothed, undernourished, and subject to lengthy periods of exposure to bad weather. He attributed the privations of food, clothing, and fuel of these wretched inhabitants to lack of employment. Hodgkin pointed out that food and clothing were as essential as cleanliness in counteracting the spread of the epidemic. He recommended the cleaning of the streets as well as the interior and exterior of houses in the districts inhabited by the poor, where he saw starvation, sickness, and accumulated filth.<sup>22</sup>

Hodgkin was convinced that the misery, distress, and ill-health of the poor, as well as their wretched housing and dependence on charitable institutions, were all due to their being unemployed. Aware that many cases can only be relieved by charity, and that experienced beggars are able to divert to themselves a disproportionate amount of the money intended for the most needy and deserving, Hodgkin devised a plan for distributing relief more efficiently. He wanted a full-time staff to make inquiry and follow-up visits to the urgent cases. He also suggested that relief articles, such as food, coal, and clothing, be distributed by vouchers to be redeemed in designated shops "at extremely low prices, rather than be actually given away. The relief so afforded" not only will reach more people and last longer, "but it will also tend to ensure the proper application of the smallest sums which the poor may be able to raise." The "visitors" could also give advice about cleanliness and household management, practices too often neglected by the poor through carelessness rather than necessity.<sup>23</sup>

The scientist in Hodgkin also recognized the opportunity presented by the cholera epidemic. He emphasized the importance of careful observation and accurate recording of all available data relating to the disease, information that could improve existing knowledge of the laws which appear to regulate widespread epidemics in general. He hoped to discover the "distinction between those circumstances which promote exemption from the disease, and those which favour predisposition to its attacks—a knowledge which can scarcely fail to be of useful application, should we again be threatened by a like awful visitation."<sup>24</sup>

The working class, said Hodgkin, was a valuable national resource

whose unemployed status was a financial loss to the community and the nation. Since money given as charity leaves nothing behind in exchange, greater good would result if the charitable money were used to provide employment to those capable of working. "Why should not Charity, as well as Avarice and Ambition, turn over her capital, instead of being limited in her exertions, and restricted to unproductive consumption?"<sup>25</sup> Hodgkin's work projects for the unemployed were the construction of railroads and pedestrian walkways.

#### ABOLITION VERSUS COLONIZATION

The Reform Act of 1832 gave Evangelicals, Nonconformists, and Radicals a more effective voice than before. High on the agenda of the new Parliament were the issues of abolition of slavery and emancipation of slaves. Britain, once the leading carrier of slaves, had undergone a crisis of conscience, and many Britons believed that the suppression of slavery and the slave trade was connected with their own moral redemption.<sup>26</sup>

There was no slavery as such in the British Isles, but a practical problem concerned slave servants brought into the country by planters from the West Indies. The issue was settled in 1772 by the legal decision that an escaping slave could not forcibly be removed from England to what would be certain vengeance in the colony. As a result of this ruling, a slave became a free man the moment he set foot in the British Islands. Slavery in the overseas colonies was unaffected, but the decision automatically freed more than 10,000 Africans in London and the provinces, who, as flamboyantly dressed and heavily powdered flunkies at stately homes and town mansions, were status symbols. They found themselves destitute because few households wanted them as wage-earners. Many concerned people realized that a free black man would become no more than a second class citizen in a white society, and colonization in a free government of their own was the only solution. Colonization appealed to those who respected private property because it did not mean the abolition of slavery. Many plans were proposed for the resettlement of liberated slaves in Nova Scotia and Sierra Leone on the west coast of Africa.<sup>27,28</sup>

There was much controversy between advocates of abolition and supporters of colonization in Africa. Although most Englishmen sympathized with American abolitionists' opposition to colonization, Hodgkin supported colonization and the new nation of Liberia. It was seen as a haven for freed slaves from the strong widespread prejudice in America and as the best means of ending slavery itself. However, colonization required voluntary emigra-



tion of freed slaves, and the abolitionists advocated immediate and universal emancipation. As a result, Hodgkin and the colonization societies appeared to be in conflict with the Anti-Slavery Society while agreeing with its ultimate objective of the extinction of slavery. This was an impassioned issue. The abolitionists charged the American Colonization Society with perpetuating slavery by aiding emigration of freed slaves, thereby depriving them of their rights as native born citizens.

#### DEFENSE OF COLONIZATION

In 1832 Hodgkin wrote the first of three pamphlets answering the objections and misrepresentations made against the American Colonization Society, of which he was a vice-president. The pamphlet, originally written as a letter, was rejected for publication by the Anti-Slavery Society's leadership and Hodgkin printed it privately. He warned that "general, immediate, and unconditional emancipation would be an act of cruelty, rather than kindness, to the Blacks" and would present them "with a gift which would be far from a blessing to them. They have been so long accustomed to consider labour and slavery as synonymous, that it is extremely difficult to obtain anything like regular labour from an emancipated Black, whilst remaining in our colonies, and surrounded by his brethren in a state of slavery. It is essential that the slave, in his progress towards freedom, should be taught that exertion and liberty are not incompatible with each other: he will then become a more useful member of society as a freeman than as a slave; and his former owner will find that his purchased and voluntary exertions are far more productive than those which he had been accustomed to extort from him by any species of coercion."<sup>29</sup> Hodgkin suggested a more gradual procedure, whereby the slave is allowed to buy back his freedom in the way a debtor pays back with a suitable period of labor to his creditor, in the manner of an indentured servant.

Hodgkin compared the prejudice in the United States against people of color, whether slave or free, with an example from English history. "There seems to be a strong tendency in man to hate those whom he has injured." He explains that "our forefathers, the common ancestors of ourselves and of the Americans, entertained a stronger prejudice against the Jews than the Americans at present do against the Blacks; and that having enriched themselves by their wealth, they either killed or banished them."<sup>30</sup>

#### CHILD LABOR

Hodgkin's interest in oppressed peoples was not limited to the overseas

territories. At home he was involved in the fight against a subtle form of slavery and abuse—child labor, with its many odious parallels to the overseas variety. The excesses of the factory system, spawned by the Industrial Revolution, fell harshly on the thousands of children employed in the cotton, silk, worsted, and flax mills throughout Great Britain. In the latter part of the 18th century, pauper children were practically sold into slavery as indentured workers to factory owners and worked for 16 hours a day, frequently with irons around their ankles. They slept in filthy beds in nearby barracks in relays and were in other ways mistreated and exploited.<sup>31</sup>

In 1832 a group of concerned citizens formed a Society for the Improvement of the Condition of Factory Children to serve as a rallying point for all who have at heart the interest of the young persons. As chairman pro tem. of its committee, Thomas Hodgkin was the signator of a single sheet<sup>32</sup> (undated, but issued in 1832) soliciting funds from the public in support of this cause, as well as the public's cooperation by launching numerous and urgent petitions in favor of a bill newly introduced in Parliament. The bill would have prohibited children under nine years of age from working in a factory, and would limit older children to 10 hours of actual labor daily.

An earlier bill, stalled by repeated hearings in committee, died when Parliament was dissolved. The factory owners opposed the legislation and tried to wear out the friends of the children with expense and delay by calling for additional hearings, hoping thereby for the public sympathy to cool or be distracted by other issues. They would then introduce such modifications into the bill that would make it nearly or completely ineffective.

The appeal to the public cited the early age at which these young people, mostly females, were sent to work, many under eight years of age—the duration of their work, for 12, 14, and even 15 hours a day, with only half an hour for meals, besides occasionally working the whole night—the heated and corrupt atmosphere in which they are confined for long periods—and the promiscuous association of the sexes, which combine to make their occupation very injurious to their health, destructive to their morals, and in many cases, fatal to their lives.

The Society was short-lived and achieved little. Even though William Allen (1770-1843), the well-known chemist and collaborator of Humphry Davy (1778-1829), was chairman of the Society, this was not mentioned in the three volumes of his official biography. In general, Quakers played no prominent part in the movement to limit factory hours for children. Wherever they did appear in the controversy, they were indifferent or almost always in opposition, except for Hodgkin and a few others. Even in Parliament they

were hostile to attempts to limit the hours of factory children. Their attitude was fairly representative of Quakers. When the 10-hour bill finally passed in 1847, some Quaker factory owners tried to subvert its intentions by means of a shift system. This hostility to factory reform did not mean insincerity or hypocrisy by the Quakers in their humanitarian efforts. People with noble motives absorb the ideals and assumptions prevailing within the social class and the period in which they lived. Freedom was uppermost among these ideals, and they did not understand that it was absurd to apply this ideal to the relationship between factory owner and employee. Even reformers are usually aware of only a few of the many abuses of the social structure in which they find themselves and wish to improve.<sup>33</sup>

#### PLANS FOR A NEW SETTLEMENT

With the new balance of power, Parliament passed the Emancipation Act of 1833, which freed the slaves in the British West Indies—to take effect the following year. The slave-holders were compensated with £20 million, less than half the value of the confiscated property. The financial settlement was a compromise between sentiment and equity. The approximately 800,000 slaves, the backbone of the economy of the West Indies, were not immediately and unconditionally set free. They had to pass through a transitional period of apprenticeship to accustom themselves, under appropriate restraints, to the responsibilities of their new status. The apprenticeship system, which had the approval of many philanthropists, in practice differed little from slavery. Reports of abuses led Parliament to discontinue this interim program. Finally, on August 1, 1838 all slaves in the British West Indies were set free. Later, similar steps were taken in other British possessions.<sup>34-37</sup>

In 1833 Hodgkin published a second article on the advantages of colonization and the successes of the American Colonization Society. The 63-page pamphlet (Figure 2) sold for one shilling and leveled some revealing criticism against William Lloyd Garrison (1805-1879), the editor of the Boston-based *Liberator*. This antislavery weekly newspaper advocated immediate emancipation and opposed African colonization.

Hodgkin charged that Garrison waged a vitriolic campaign of distortion, misinformation, and out-of-context quotations against the American Colonization Society. Garrison claimed that the American Colonization Society was organized in the interests of slavery, and that in offering itself as a practical remedy for that system it was guilty of deception. In refuting the unjust

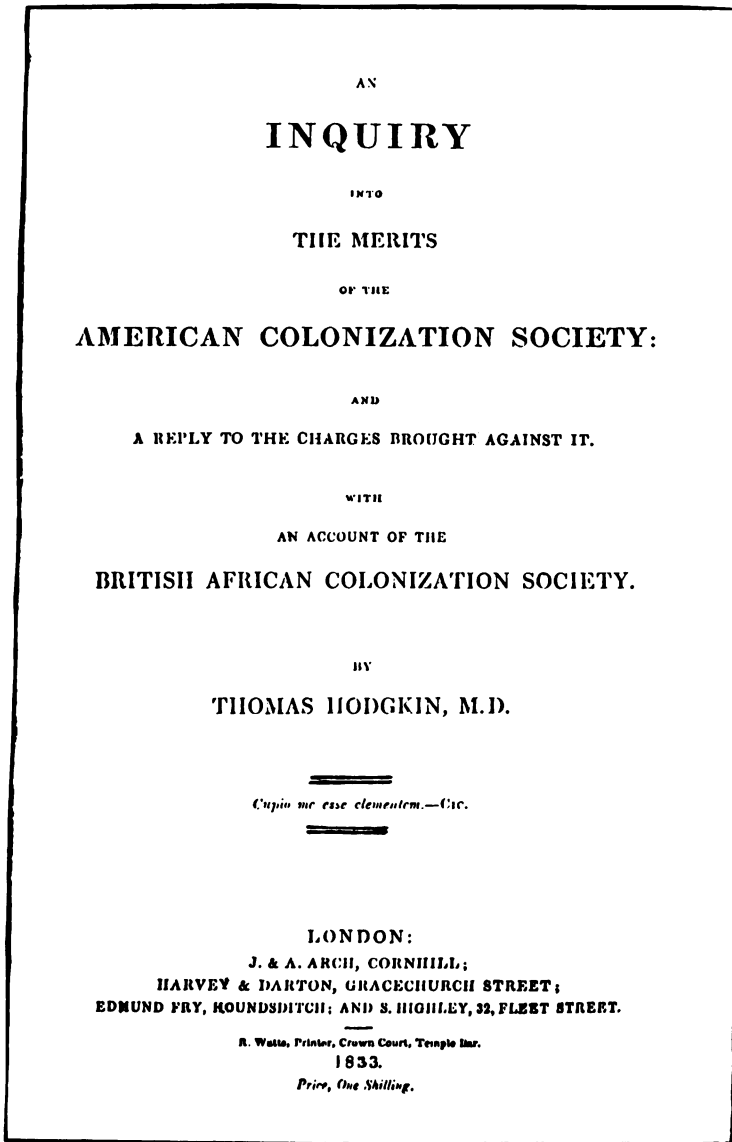


Fig. 2. Title page of Hodgkin's pamphlet on the American Colonization Society

charges, Hodgkin summarized the objectives of the American Colonization Society as follows: the elimination of slavery indirectly by voluntary liberation; the suppression of the African slave trade by the establishment of civilized settlements of free American blacks along the Western coast of Africa; to benefit Africa by the introduction of civilization and Christianity.<sup>38</sup>

He pointed to the contradiction in the free states of America, where the free colored people suffer from the most unjustifiable prejudices and are subjected to scorn and contempt. In Africa the black man becomes a member of a community in which he is free and equal. Relocation of liberated slaves to northern free states did not improve their condition, because only the most menial and unproductive work was available to them, if even that. Hodgkin compared this migration to the North to the large influx of the Irish into England which had flooded the labor market.<sup>39</sup>

Hodgkin pointed to the success of the American Colonization Society's projects in Liberia, and urged British involvement in a similar enterprise to establish new markets for the sake of British prosperity and nationalism. British presence and influence on the West Coast of Africa would allow Britain to participate in the benefits from colonization before inroads are made by other European powers. British sponsored colonies, said Hodgkin, could be settled by freed blacks from America and the West Indies, and eventually joined by the local natives to become new trading partners for Britain's products. Eventually they would obtain Britain's protection, while retaining self-government on the American model.<sup>40</sup>

Hodgkin was a capitalist. He thought of business, trade, and profits. Emancipation was one thing, colonization was another. To Hodgkin and those in the evangelical movements, there was nothing wrong with colonialism. This imperialist vision was entirely justified and morally desirable because it served humanitarian ends. The natives in the overseas British territories would benefit from British moral authority and legal justice. Their ignorance and paganism would be overcome by teaching "the simpler peoples the benefits of Steam, Free Trade and Revealed Religion, . . ."<sup>41</sup>

The plan for the new colony originated with Hodgkin's good friend and Quaker philanthropist, Elliott Cresson (1796-1854) of Philadelphia, whom he had met in London in July of 1825. Cresson had come again to England in 1831 seeking financial support for the American Colonization Society and its projects in Liberia. Finding some sentiment for colonization on the part of other distinguished Englishmen, he organized a British African Colonization Society as a counterpart to the American-based organization to establish a colony of American blacks at Cape Mount, north of Liberia.

In soliciting financial contributions Hodgkin offered the prospect of participation in the formation of a new state. Those able to contribute more than ten guineas per settler would give their name to a parish or hamlet by the donation of £100 before the price of the land increased.<sup>42</sup>

The British African Colonization Society faced the same opposition

from the Anti-Slavery Society as did the American Colonization Society. Hodgkin countered that "the energetic language of the *Liberator*" had not freed one slave but created opposition against Garrison because he is suspected of stirring up the blacks, who constitute a large majority of his subscribers.<sup>43</sup>

Cresson's efforts were also hampered, and he was subjected to unfounded personal attacks and abusive language by the opponents of the Colonization Society. He had come at an inopportune time coincident with the completion of the campaign to end slavery in the British Empire and was emphatically rejected by British abolitionists. They had been convinced by Garrison that colonization was not a genuine antislavery program, but a scheme to export unwanted blacks.<sup>44,45</sup> Consequently, they regarded colonization as proslavery and viewed Hodgkin and his organization with hostility and suspicion.<sup>46</sup> Garrison proposed a public debate between himself and Cresson. Cresson agreed, but his supporters, fearing that such an occasion was more likely to arouse painful feelings than to elicit the truth, suggested a private conference. Garrison refused, offering no explanation.<sup>47</sup>

Hodgkin was loyal to the American Colonization Society. He corresponded with its leaders, entertained them in London, and defended them from malicious falsehoods by abolitionists in England and the United States. In 1834 he wrote a third pamphlet, repeating much of the information about the British settlement plans. He included a letter from a Quaker spokesman in North Carolina who related the activities of the Society and some new instances of Garrison's literary harangues. Hodgkin defended and documented the progress being made in Liberia, and pointed to the failure of Sierra Leone (first settled in 1787 by freed slaves shipped from England), which had met with more difficulties, experienced more crime, and achieved less success than the American colony. Hodgkin suggested that to promote British honor and interests, the planners of the new colony should cooperate with the Americans in Liberia and follow their example.<sup>48</sup> The British African Colonization Society was a short-lived organization, from 1834 to 1835, and its plan for a colony was never realized.

#### SUMMARY

In 1832 Thomas Hodgkin described the syndrome for which he is known. He also wrote a pamphlet on the cholera epidemic that struck England that year, offering advice and suggesting that illness among the poor was due to their lack of employment. His philanthropic interests were expressed in criticism of child labor and, in the first of three pamphlets, in support of the

activities of the American Colonization Society and its program of colonization for freed American slaves on the west coast of Africa.

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  42. Hodgkin, 1833, *op. cit.*, pp. 59-60.
  43. *Ibid.*, p. 32.
  44. *Ibid.*, pp. 53-54.
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  46. Temperley, *op. cit.*, p. 267.
  47. Hodgkin, 1833, *op. cit.*, p. 55.
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